**AMENDMENTS TO THE CLAIMS**

This listing of claims will replace all prior versions and listing of claims in the application:

Please cancel claims 1-3, 12, 15, amend claims 4-5, 7-10, 13, 14, and 16 and add new claim 28 as follows:

1. Canceled

2. Canceled

3. Canceled

4. (Currently amended) The method of Claim ~~1~~ 13, wherein said antibody is a chimeric, humanized or human anti-CD20 antibody.

5. (Currently amended) The method of Claim ~~1~~ 13, wherein said antibody is administered at a dosage ranging from 0.1 to 30 mg/kg.

6. (Original) The method of Claim 5, wherein said dosage is administered weekly for about 2 to 10 weeks.

7. (Currently amended) The method of Claim ~~1~~ 13, wherein said antibody is rituximab.

8. (Currently amended) The method of Claim ~~3~~ 13, wherein said antibody is administered in combination with at least one treatment selected from the group consisting of radiation, chemotherapy, and lymphokine administration, and wherein said lymphokine administration serves to upregulate the expression of CD20 on tumor cells.

9. (Currently amended) The method of Claim ~~1~~ 13, wherein said antibody is administered by infusion at a dosage of 375 $mg/m^2$ weekly for a total of four weeks.

10. (Currently amended) The method of Claim ~~8~~ 13, wherein said lymphokine is selected from the group consisting of IL-4, GM-CSF, TNF-alpha and interferon alpha.

11. (Previously presented) The method of Claim 8, wherein said chemotherapy is selected from the group consisting of chlorambucil (leukemia), prednisone, cyclophosphamide, a combination of cyclophosphamide, vincristine and prednisone (COP), a combination of cyclophosphamide, vincristine, prednisone and doxorubicin (CHOP) and Fludarabine.

12. Canceled

13. (Currently amended) A method of treating a subject having a hematologic malignancy selected from the group consisting of B-prolymphocytic leukemia (B-PLL), chronic lymphocytic leukemia (CLL) and transformed non-Hodgkin's lymphoma by administering a therapeutically effective amount of an anti-CD20 antibody or fragment thereof, said amount being effective to achieve a reduction in circulating tumor cells.

14. (Currently amended) A method of avoiding or reducing the toxicity associated with administration of a therapeutic antibody to patients having a hematological malignancy ~~with high levels of circulating tumor cells in the blood, wherein said hematologic malignancy is characterized by a white blood cell count from about $4 \times 10^9$ to about $200 \times 10^9$ white blood cells per liter of blood, said method~~ selected from the group consisting of B-prolymphocytic leukemia (B-PLL), chronic lymphocytic leukemia (CLL) and transformed non-Hodgkin's lymphoma comprising administering ~~said~~ an antibody that binds to the CD20 antigen on human B cells according to a stepped-up dosage scheme such that infusion-related reactions associated with full dosing are at least substantially avoided.

15. Canceled

16. (Currently amended) The method of Claim ~~15~~ 14, wherein said antibody is a chimeric antibody.

17. (Previously presented) The method of Claim 16, wherein said antibody is rituximab.

18. (Previously presented) The method of Claim 17, wherein said antibody is administered at an initial dose of 100 mg/m$^2$, and the remainder of a 375 mg/m$^2$ dose is administered on the following day.

Claims 19-27. Canceled

Please add new claim 28 as follows:

28. (New) A method of treating a subject having chronic lymphocytic leukemia by administering a therapeutically effective amount of an anti-CD20 antibody or fragment thereof, said amount being effective to achieve a reduction in circulating tumor cells.